



HOOPA VALLEY TRIBE ENROLLMENT COMMITTEE APPLICATION INSTRUCTIONS

CHECKLIST FOR ENROLLMENT APPLICATION

- ❖ COMPLETE APPLICATION (Applicant's under 18 requires parent signature)
Guardians must include a copy of placement or court order of custody.
- ❖ COMPLETE FAMILY TREE TO THE BEST OF YOUR KNOWLEDGE.
- ❖ ATTACH THE **ORIGINAL** CERTIFIED BIRTH CERTIFICATE. *(Note: Original copy will be kept in the applicant's file upon final approval of enrollment.) Applicant's denied membership the original will be returned by certified mail.*
- ❖ ATTACH A **LEGIBLE** COPY OF APPLICANT'S SOCIAL SECURITY CARD.
- ❖ **Married parents of applicant:** To include father's blood degree, parents married nine (9) months prior to child's birth must include a certified copy of marriage certificate.
- ❖ **Unmarried parents of applicant:** DNA testing is not required if eligibility is through mother. Eligibility through father will require establishing paternity; by DNA testing. Testing will be scheduled upon receipt of payment of \$65.00 per individual by cash or money orders only. Make money orders payable to: HVT-Enrollment Department. Or, you may submit cash to the Enrollment Staff at the physical address listed below. (Do not mail cash for dna testing).

Applicant's have 90 days to complete their application for enrollment. The HVT-Enrollment Committee reserves the right to deny incomplete applications remaining on file after 90 days.. Applicant's may reapply with all required documentation.

Completing all requirements for Enrollment is the responsibility of the applicant or the applicant's parents.

For more information please contact the Enrollment office at:

Telephone: 530 625-4364 Ext. 10, or Email: hvtenroll@yahoo.com

Mailing Address:

HVT-Enrollment Department
Post Office Box 1348
Hoopa, California 95546

Physical Address:

HVT-Enrollment Department
761 Loop Road
Hoopa, California 95546

Establishing Paternity

(Parentage blood testing is not required if eligibility is through mother).

However, unmarried parents wishing to include father's blood degree; paternity blood testing will be required.

The Cost for testing:

A) \$65.00 per person must be paid in advance by mailing a money order to the P.O. Box, or deliver cash to the address listed.

B) The alleged father/tribal member parent must sign the "Agreement to Bear Cost of Parentage Testing."

If parentage testing confirms parentage for (alleged father) tested, any fees collected will be refunded.

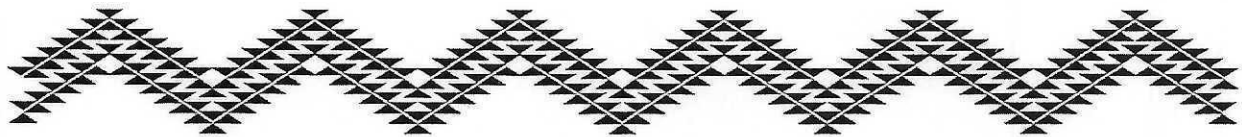
Hoopa & Surrounding area residents: Pay fees in advance, schedule testing.

Residing outside the Hoopa Area: Call Enrollment staff to discuss testing options in your area.

Incarcerated: A court order for DNA collection is mandatory. Contact Enrollment staff to discuss testing options.

It is the applicant or parent(s) of the applicant responsibility to schedule an appointment with the Enrollment Office for parentage testing (if the alleged father's blood degree is to be used) and submit all required documentation to complete the enrollment process.

For more information visit www.hoopa-nsn.gov to review Title 9 Enrollment Ordinance of the Hoopa Valley Tribe.



**HOOPA VALLEY TRIBE
APPLICATION FOR ENROLLMENT**

Date Received: _____
Mail _____ In Person _____
Received by: _____

TO BE FILLED OUT BY THE PERSON MAKING APPLICATION AND SIGNED BY EACH TRIBAL MEMBER THROUGH WHOM ELIGIBILITY IS CLAIMED.

FULL NAME OF APPLICANT FOR ENROLLMENT: _____

INDIAN, OR OTHER NAME BY WHICH KNOWN: _____

MAILING ADDRESS: _____

CITY STATE ZIP

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

PHONE # (____) _____ SOCIAL SECURITY NUMBER ____ / ____ / ____
(Please attach copy of Social Security Card)

ANCESTOR ON BASE ROLL THROUGH WHOM ENROLLMENT RIGHTS ARE CLAIMED:
NAME: _____ ROLL #: _____ RELATIONSHIP: _____

DEGREE OF INDIAN CLAIMED:
HUPA TRIBE: _____ OTHER: _____ TOTAL DEGREE: _____

IS EITHER OF APPLICANT'S PARENTS ENROLLED AS A MEMBER OF ANOTHER TRIBE? _____
IF YES, THE PARENT AND TRIBE: _____

IS APPLICANT ENROLLED WITH ANOTHER TRIBE? YES _____ NO _____

IS APPLICANT AN ADOPTED CHILD? YES _____ NO _____

IS APPLICANT A DIRECT LINEAL DESCENDANT OF A MEMBER OF THE HOOPA TRIBE? _____

ORIGINAL CERTIFIED BIRTH CERTIFICATE MUST BE PROVIDED AS REQUIRED, AND
MUST BE SUBMITTED WITH APPLICATION FORM. CERTIFIED BIRTH CERTIFICATE WILL BE
PERMANENTLY MAINTAINED IN NEW ENROLLEE'S MEMBERSHIP FILE.

Mother Signature: _____ DATE: _____

Father Signature: _____ DATE: _____

Applicant Signature: _____ DATE: _____

Guardian Signature: _____ DATE: _____

Applicant		Father		Grandfather		Great Grandfather	
Tribe & Blood Degree		Tribe & Blood Degree		Tribe & Blood Degree		Tribe & Blood Degree	
Date of Birth		Tribe & Blood Degree		Grandmother		Great Grandmother	
Place of Birth		Tribe & Blood Degree		Tribe & Blood Degree		Tribe & Blood Degree	
		Mother		Grandfather		Great Grandfather	
		Tribe & Blood Degree		Tribe & Blood Degree		Tribe & Blood Degree	
				Grandmother		Great Grandmother	
				Tribe & Blood Degree		Tribe & Blood Degree	
						Great Grandmother	
				Tribe & Blood Degree		Tribe & Blood Degree	
						Great Grandmother	
				Tribe & Blood Degree		Tribe & Blood Degree	
						Great Grandmother	